

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Permit #:	19-0360
Date:	10-3-19
Amount Paid:	\$75 12-3-18 \$100 12-3-18
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

ATF+Imp Surface

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input checked="" type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: Vincent A. Beacom	Mailing Address: 2765 Shadywood Ln Orono, MN 55331	City/State/Zip: Cable, WI 54821	Telephone: (763) 443-5443
Address of Property: 45640 Ponders Pt. Rd.	City/State/Zip: Cable, WI 54821	Contractor: self	Plumber: Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Mike Fortak	Agent Phone: (715) 817-2034	Agent Mailing Address (include City/State/Zip): Iron River, WI 54847	Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION 1/4, 1/4	Legal Description: (Use Tax Statement) Gov't Lot 1, Lot(s) 1+2, CSM 367, Vol & Page 3,236+	Tax ID# 8394	Recorded Document: (Showing Ownership) 2017 R 567169
Section 5, Township 43 N, Range 7 W	Town of: Cable	Lot Size 1.826	Acreage

<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : 75 feet		
<input type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms in structure	What Type of Sewer/Sanitary System Is on the property?	Type of Water on property
\$	<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> Walkout	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Cdn	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)		Use	<input checked="" type="checkbox"/> 4	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property		<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/>				<input type="checkbox"/> Compost Toilet	
					<input type="checkbox"/> None	

Existing Structure: (if permit being applied for is relevant to it)	Length: 84	Width: 30	Height: 35
Proposed Construction:	Length: 12	Width: 14	Height: 12

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date)	(X)	
	<input checked="" type="checkbox"/>	Addition/Alteration (specify) deck	(12 x 14)	168
	<input type="checkbox"/>	Accessory Building (specify)	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify)	(X)	
	<input type="checkbox"/>	Special Use: (explain)	(X)	
	<input type="checkbox"/>	Conditional Use: (explain)	(X)	
	<input type="checkbox"/>	Other: (explain)	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):
(If there are Multiple Owners listed on the Deed ALL Owners must sign or letter(s) of authorization must accompany this application)

Date

Authorized Agent: Michael Fortak
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date 12-3-2018

Address to send permit 6173 Iron Lake Rd, Iron River, WI

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

54847

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

See attachment

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
<u>Private Easement Rd</u>			
Setback from the Centerline of Platted Road	28 Feet	Setback from the Lake (ordinary high-water mark)	175 Feet
Setback from the Established Right-of-Way	NA Feet	Setback from the River, Stream, Creek	NA Feet
		Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	10 Feet		
Setback from the South Lot Line	100+ Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	40+ Feet	20% Slope Area on the property	X Yes <input type="checkbox"/> No
Setback from the East Lot Line <u>Lake</u>	NA Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	9' Feet	Setback to Well	8 Feet
Setback to Drain Field	45 Feet		
Setback to Privy (Portable, Composting)	NA Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: <u>09-1446</u>	# of bedrooms: <u>4</u>	Sanitary Date: <u>10/21/09</u>
Permit Denied (Date):		Reason for Denial:		
Permit #: <u>19-0360</u>		Permit Date: <u>10-3-19</u>		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record) <input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Case #: <u>#19-0103</u>		<input type="checkbox"/> Yes <input type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:		Zoning District <u>(RRB)</u>		
Date of Inspection: <u>9/30/19</u>		Lakes Classification <u>(1)</u>		
Inspected by: <u>[Signature]</u>		Date of Re-Inspection:		
Condition(s): <u>Town, Committee or Board Conditions Attached?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.)				
Condition: Maximum occupancy limited to <u>4 Bedroom/sleeping areas</u> based upon septic system design for the dwelling. Must contact Bayfield County Health Dept for licensing as required by State Statute and contact Town regarding room tax.				
Signature of Inspector:		Date of Approval:		
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	or Fees: <input type="checkbox"/>	<input type="checkbox"/>	

Vincent & Beth Beacom
5630 Pineview Lane N.
Plymouth, MN 55442
763-443-5443

63437

Scale: 1" = 40'

Ponders Pt. Rd.

G.L. 1, SS, T43N, R7W

LOTS 1 & 2, CSM #367

Town of Cable

Bayfield Co., WI

04-012-2-43-07-05-1

05-001-03000

▲ BM = 100' @ Nail in ribboned
white pine tree. (2' A.G.L.)

Elevations:

B1 = 99.7'

B2 = 99.4'

B3 = 102.3'

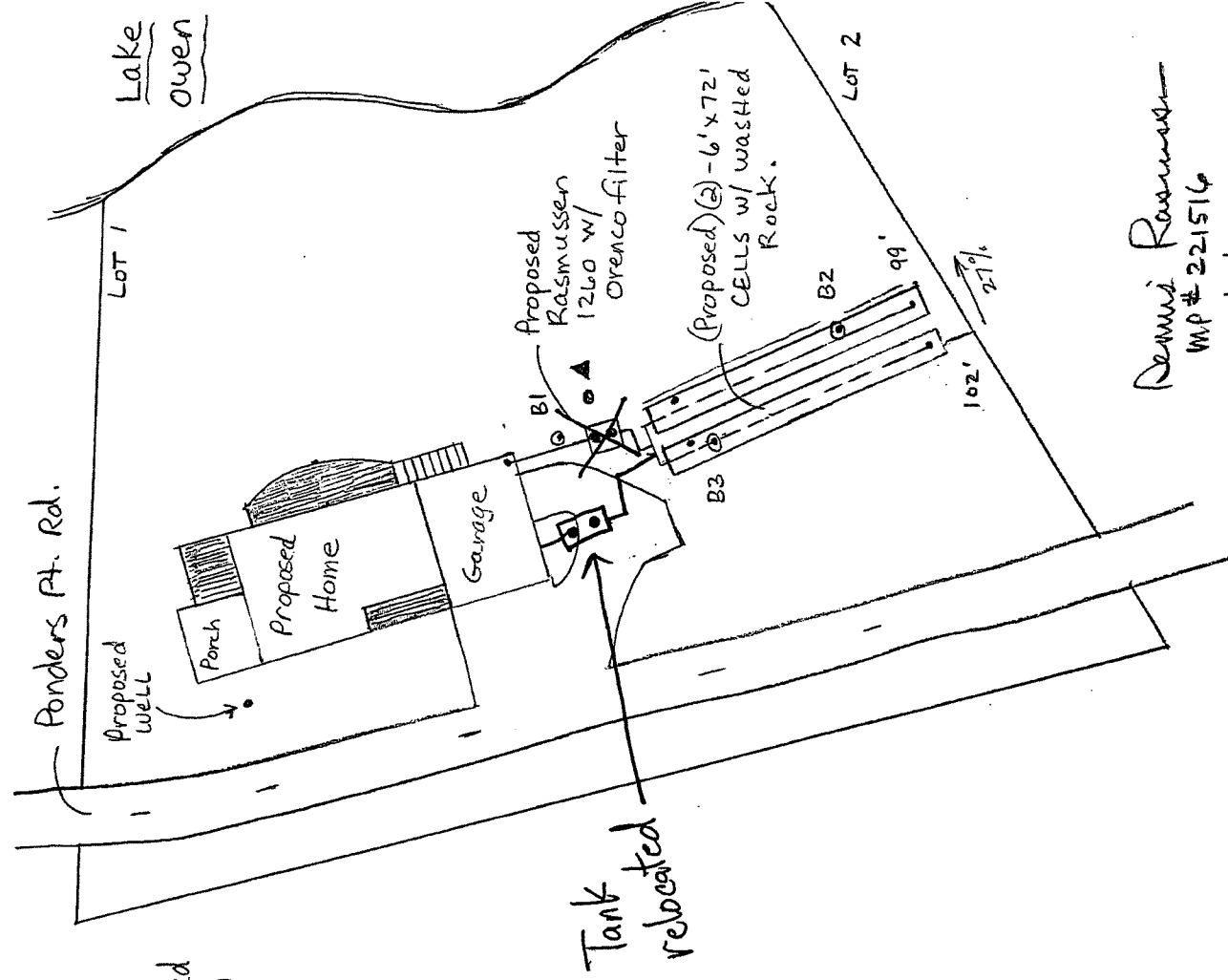
System = 96.0'

Proposed Bldg. Sewer = 98.3'

Lake = 66.0'

HWM = 67.0'

* Soil Test: Joe Zirn 9/9/08



Dennis Rasmussen
MP # 221516
10/16/09

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

City, Village, State or Federal
May Also Be Required

LAND USE – **X**
SANITARY – (09-144S)
SIGN –
SPECIAL –
CONDITIONAL –
BOA – **X** (# 19-01B) (4/25/2019) - Affidavit (Doc. #2019R-577723)

No. **19-0360** Issued To: **Vincent Beacom**

Location: $\frac{1}{4}$ of $\frac{1}{4}$ Section **5** Township **43** N. Range **7** W. Town of **Cable**

R-RB zone / shoreland

Gov't Lot Lot **1 & 2** Block Subdivision CSM# **367** (Doc # 344727)

(Tax ID# 8394, in Doc # 2017R-567169 in Register of Deeds Office)

For: **An After-the-Fact Reconsideration of Special Exception (09-11B) condition #**

Permit allows the applicant an increase in footprint from 2,774 sq. ft. (in 2009) to 2,821 sq. ft. (in 2019). The increase of footprint allows the applicant to keep the existing (after-the-fact) Deck (12' x 14' = 168 sq. ft.).

You (the property owner) shall fulfill the conditions placed by the Board of Adjustment; your recorded affidavit; sanitary (if applicable) and/or any additional requirements placed by this Department. The Planning and Zoning Department requires verification/proof that all conditions have been met. Any future expansions or development would require additional permitting. (Disclaimer): The Planning and Zoning Department does not authorize the beginning of any construction or land use; you must first obtain land use application(s)/permit card(s) from the Planning and Zoning Department.

Condition(s): Subject to all other applicable terms and conditions of the original Special Exception (09-11B) and all other applicable terms and conditions of the Bayfield County Zoning Ordinance. Maximum occupancy limited to 4 bedrooms / sleeping areas based upon septic system design for the dwelling. Must contact Bayfield County Health Department for licensing as required by State Statute and contact Town regarding room tax.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: Changes in plans or specifications shall not be made without obtaining approval.

This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Board of Adjustment / Robert Schierman

Authorized Issuing Official
October 3, 2019

Date